

Application Data Sheet**Application Information**

Application Type::	Regular
Subject Matter::	Utility
CD-ROM or CD-R:	None
Title::	SYSTEMS AND METHODS FOR QUALIFYING EXPECTED LOSS DUE TO CONTINGENT DESTRUCTIVE HUMAN ACTIVITIES
Attorney Docket Number::	116168
Total Drawing Sheets::	7
Small Entity::	Yes

Applicant Information

Applicant Authority type::	Inventor
Primary Citizenship Country::	U.S.
Status::	Full Capacity
Given Name::	E.
Middle Name::	DeVere
Family Name::	HENDERSON
City of Residence::	Arlington
State or Province of Residence::	Virginia
Country of Residence::	U.S.A.

Applicant Authority type::	Inventor
Primary Citizenship Country::	U.S.
Status::	Full Capacity
Given Name::	Timothy
Middle Name::	P.
Family Name::	COFFIN
City of Residence::	Springfield
State or Province of Residence::	Virginia
Country of Residence::	U.S.A.

Correspondence Information

Correspondence Customer Number:: 25944

Domestic Priority Information			
Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application is a	Non- Provisional of	60/474,931	06/03/2003
Assignee Information			
Assignee Name::		RISK ASSESSMENT SOLUTIONS, LLC	
Street of mailing address::		4600 South Four-Mile Run Drive	
		Suite 910	
City of mailing address::		Arlington	
State or Province of mailing address::		Virginia	
Country of mailing address::		U.S.A.	
Postal or Zip Code of mailing address::		22204	